

they do want reform—they will tell you they want to see control of the skyrocketing cost of health care, particularly the cost of insurance premiums. They would like to see increased access to quality medical care. It has been said a number of times by the proponents of this legislation that this bill accomplishes those objectives, but let's look at exactly what the Congressional Budget Office has told us on the core issue; namely, what is going to happen to your insurance premiums if this bill is passed.

What the Congressional Budget Office very clearly said, which is also backed by 7, 8, 9 or 10 other studies from the private sector as well as the Joint Committee on Taxation and backed by the Chief Actuary for the Center for Medicare and Medicaid Services, is that for at least 30 percent and the most vulnerable people in America, if you are looking at whether your insurance premiums are going to go up or down, they are going to go up, not down. If you are a member of the 17 percent of Americans who get your insurance in the individual market, your insurance is going to go way up. In fact, it is going to go up by as much as 10 to 13 percent in addition to what it would have gone up without the bill. If you are someone who gets your business from small groups, from a small group market, your insurance costs are going to go up from 1 to 3 percent. If you are one of the Americans who is able to get your insurance in the large group market, then you can basically expect that the bill will have no significant impact on you. There is a possibility of a slight reduction, but the potential is, it is going to have no impact at all.

What does the bill do? For 17 percent of Americans in the individual market and for 13 percent of Americans in the small group market, it clearly makes your health care premiums go up. For those who are in the remainder of the market, it basically doesn't achieve the objective of health care reform—and at what price? We often hear we need to bend down the cost curve. As I have indicated, this legislation doesn't bend down the cost curve Americans are talking about; namely, the price of their health care or their health insurance. What does it do with regard to the Federal Government? It is going to increase the cost to the Federal Government on health care by \$2.5 trillion in a massive new entitlement program. So that price curve is not bent down.

Then what are we left with? Some say the deficit will go down under this bill. There is only one way the deficit can go down under this bill; that is, if you take away the budget gimmicks, massive tax increases, and massive Medicare cuts. But I will just talk about the budget gimmicks because of a lack of time. The spending side of this bill is delayed for 4 years. The taxing and cutting Medicare side of the bill is implemented on day one. So we have 10 years of tax increases to offset

6 years of spending. I think that is the way the number was reached. You have to figure out how many years to delay the spending start before you can say there was a deficit-neutral bill. The reality is, this bill doesn't deal with any of those spending curves.

The matter we will be voting on in a few minutes is my motion that would address the tax side of the bill. All it says is: Let's change the bill to comply with the President's promise; namely, that people making less than \$200,000 a year or \$250,000 as a couple would not pay more taxes. What we found from the Joint Tax Committee is, 73 million Americans in that category will pay more taxes. In fact, it is not 73 million Americans, it is 73 million American households who will pay more taxes and see a tax increase under this bill and not just a small one. It is massive, hundreds of billions of dollars of new taxes that will be imposed by this bill.

In response, the proponents of this bill say: But this bill is a tax cut. The only way they can say this bill is a tax cut is by looking at the subsidy that is going to be provided as a tax cut. It is called a refundable tax credit, although three-fourths of it, 73 percent to be accurate, goes to people who do not pay taxes. Yet it is called tax relief because it is administered through the Tax Code and is described as a refundable tax credit. The CBO gets this and Americans get it. The Congressional Budget Office says these aren't tax cuts. This is spending, and it is scored that way by the CBO as it analyzes the bill. The only way you can say this bill involves these kinds of tax cuts is if you say that a provision that will simply result in the payment of a check by the Federal Government to an individual who has no tax liability to assist them with their health care costs is a tax cut. Let's accept that.

Even in that case, only 7 percent of Americans qualify for that subsidy, and the rest qualify for the tax increases. To say the President's promise was that I will not cut your taxes more or I will not increase your taxes more than I will cut someone else's taxes and, by the way, I will call a direct subsidy a tax cut, is not exactly what I think the President meant. It is not what the American people thought he meant when he said Americans making less than \$200,000 or \$250,000 as a family would not pay more taxes under this bill.

My proposal simply says send this bill back to the Finance Committee. They can turn it around quickly, if they want to. Have them take out the provisions that violate the President's pledge on taxes.

I retain the remainder of my time.

The PRESIDING OFFICER. The Senator from North Dakota.

Mr. DORGAN. I yield 3 minutes to the Senator from Ohio.

Mr. BROWN. Mr. President, I rise in support of the Dorgan amendment on reimportation. This is not about importing drugs from China or India or

Mexico, where drug safety standards are not up to par. Although American companies have outsourced a lot of their manufacturing to those countries and found a lot of problems with the ingredients they import into American drugs, that is not the issue. That underscores the hypocrisy of U.S. drug companies in opposing the Dorgan amendment.

This is about importing drugs from countries such as Canada and Germany and Australia and New Zealand and Japan, countries with highly developed drug safety regimes. Patients in England and France and Germany and New Zealand and Canada have the same protections we do. I have been in drug stores in Canada just 2 hours from Toledo, less than that, and you see the same drug and the same dosage, the same packaging, the same company making them. In Canada, it is 35 to 55 percent lower than in the United States. One drug, the cholesterol-lowering drug Lipitor, is \$33 in Canada, \$53 in France, \$48 in Germany, \$63 in the Netherlands, \$32 in Spain, \$40 in the United Kingdom. Same packaging, same company, same dosage, same drug is \$125 in the United States. We pay more, even though, in most cases, these drugs are either manufactured in the United States or developed, in some cases, by U.S. taxpayers, developed certainly in the United States for Americans, but we pay two and three times more.

A 2009 Consumer Reports survey found that due to high drug prices, one out of six consumers failed to fill a prescription, one out of six consumers skipped doses.

Mr. President, 23 percent of consumers cut back on groceries. They choose between do I get my groceries or pay for this drug? Consumer after consumer will cut their pill in half and take one part today and one part the next day, which is not what their doctor says they should do. We know this is not good for Americans' health. We know this is not good for Americans' pocketbooks. We know this is not good for taxpayers. It is not good for small business. It is not good for big business, large American companies that are paying the freight, that are paying these costs. American consumers and taxpayers and businesses are suffering from these high costs.

Pharmaceutical companies hike up prices, rake in massive profits. They are one of the three most profitable industries in this Nation and have been for decades. The pharmaceutical industry, in 2008, recorded sales in excess of \$300 billion, with a 19-percent profit margin. This is in a bad year—a bad year for most of us in this country, in 2008. In the last year alone, the brand-name prescription drug industry raised their prices by more than 9 percent.

I ask my colleagues to support the Dorgan amendment.

The PRESIDING OFFICER. The Senator's time has expired.

The Senator from Montana.